



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Domestic Non-Profit  
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

**This form is only to be used to amend the current annual report on file with this office.**

**ANNUAL REPORT YEAR:** 2016

**1. Corporate ID No.** 000535758

**2. Name of Corporation** Conrad Condominium Assoc. Inc.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 385 WESTMINSTER ST

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town:

State:

Zip:

Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

HOMEOWNERS ASSOCIATION

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

*THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23*

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	RHETA SHOCKLEY	385 WESTMINSTER ST PROVIDENCE, RI 02903 USA
SECRETARY	ELSA DURE	385 WESTMINSTER ST. PROVIDENCE, RI 02903 USA
PRESIDENT	JOSH SHOCKLEY	385 WESTMINSTER ST PROVIDENCE, RI 02903 USA

DIRECTOR	LESLIE BLAIR	385 WESTMINSTER ST PROVIDENCE, RI 02903 USA
DIRECTOR	GREY JONES	385 WESTMINSTER ST PROVIDENCE, RI 02903 USA
DIRECTOR	CHARLES FELDMAN	385 WESTMINSTER ST. PROVIDENCE, RI 02903 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

PATRICIA TURNER 2000 WARWICK AVENUE WARWICK , RI 02889

**Signed this 22 Day of September, 2016 at 2:33:47 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By PATTIE TURNER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

